	PE	F PART B	FEE(S) TRAN	SMITTAL	-		
- / .	d this form, togeth	er with applicable i	Ī	O. Box 1450			
	o 5 2007		or Fax (Mexandria, Vir _i 571)-273-2885	;		·
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JAMES R. CY 405 14TH STRE			Certificate of Muiling or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the Usuales Postal Service with sufficient postage for first class mail in an envaderssed to the Mail Stop ISSUE FEE address above, or being fact transmitted to the USPTO (571) 273-2885, on the date indicated below.				
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10/693,595	10/23/2003	7 TD	Charles Rocsset			SST/1363	1091
TITLE OF INVENTION	1: ROOF BOUNDARY C	Lu-					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID IS	SUE FCE	TOTAL FEE(S) DUB	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	10/29/2007
EXA	MINER	ART UNIT	CLASS-SUBCLASS				•
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent automorphism or agents OR, alternatively, (2) the name of a single firm (having as a member unegistered attorneys or agent) and the names of up to 2 registered parent automorphism or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME	AND RESIDENCE DAT.	A TO BE PRINTED ON	THE PATENT (print	ortype) he potent If an ass	ijenee is id	ientified below, the do	cument has been filed to
PLEASE NOTE: Unrecordation as set for	nless an assignee is identral in 37 CFR 3.11. Com	pletion of this form is NC	T a substitute for filin	g un assignment.	יי פיי פייים	MD VA	
(a) NAME OF ASS Simpson St	(B) RESIDENCE: (C 5956 W. L Pleasanto	n, Califorr	iia 94	588	_		
Please check the approp	printe assignee category o	r categories (will not be p	rinted on the patent) :	Individual X	Corporat	ion or other private grot	op entity Governmen
40. The following fee(s	ib. Payment of Fec(s): (Picase first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is anached.						
Publication Fee	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, in Deposit Account Number 03-40/5 (enclose an extra copy of this form).						
☐ - A - 11 - A - 1 - A	tatus (from status indicau ims SMALL ENTITY stat	nie See 37 CFR 1 27	☐ b. Applicant is n	o longer claiming Si	MALL EN	TITY status. See 37 CF	R 1.27(g)(2).
NOTE: The Issue Fee	and Publication Fee (if re	mired) will not be accept	ed from anyone other	than the applicant a	registered	altomey or agent; or the	e assignce or other party i
Authorized Signature			ed from anyone other than the applicant; a registered attorney or agent; or the assignce or other park Office Dute <u>October 5, 2007</u>				
Typed or printed name Charles R. Cypher			Registration No. 41,694				
This collection of info an application. Confid submitting the comple this form and/or sugge Box 1450, Alexandra	rmation is required by 37 entiality is governed by 3 ted application form to distinct for reducing this b., Virginia 22313-1450. D	CFR 1.311. The information of U.S.C. 122 and 37 CFI at USPTO. Time will valurden, should be sent to O NOT SEND FEES Of persons are required to the control of the control o	tion is required to obta R 1.14. This collection ry depending upon the the Chief Information R COMPLETED FORI	in or retain a benefit is estimated to take individual case. Ar Officer, U.S. Patent MS TO THIS ADDI of information unle	by the put 12 minute by commer and Trade (ESS, SEN ss it displa	olic which is to file (and se to complete, including to on the amount of the mark Office, U.S. Depa TO: Commissioner for ys a valid OMB control	by the USPTO to process gathering, preparing, an ore you require to complete the complete the process of Commerce. P.C. or Patents, P.O. Box 1451 number.